

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Stark County Republican Party

ADDRESS (number and street)

2729 Fulton Dr NW

☐ Check if different than previously reported. (ACC)

Canton

OH

44718

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00270934

3. IS THIS REPORT

☐

NEW (N)

OR

☒

AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15 Quarterly Report (Q1)☐ July 15 Quarterly Report (Q2)☐ October 15 Quarterly Report (Q3)☐ January 31 Year-End Report (YE)☐ July 31 Mid-Year Report (Non-election Year Only) (MY)☐ Termination Report (TER)

(b) Monthly Report Due On:

☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11) (Non-Election Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12) (Non-Election Year Only)☐ Apr 20 (M4)☒ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
06 01 2015

through

M M M / D D D / Y Y Y Y Y Y
06 30 2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Cynthia E Meisner

Signature of Treasurer

Cynthia E Meisner

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
02 02 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Stark County Republican Party

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y
 06 / 01 / 2015

To:

 M M / D D / Y Y Y Y Y
 06 / 30 / 2015

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand January 1, 2015 | | 18071.72 |
| (b) Cash on Hand at Beginning of Reporting Period..... | 69140.13 | |
| (c) Total Receipts (from Line 19) | 2398.08 | 86638.15 |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)..... | 71538.21 | 104709.87 |
| 7. Total Disbursements (from Line 31) | 20420.90 | 53592.56 |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | 51117.31 | 51117.31 |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | .00 | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | .00 | |



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Stark County Republican Party

Report Covering the Period:

From:

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06 | / | 01 | / | 2015 |

To:

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06 | / | 30 | / | 2015 |

I. Receipts
COLUMN A
Total This Period
COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

1625.00

78175.00

(ii) Unitemized

77.53

5017.60

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

1702.53

83192.60

(b) Political Party Committees

.00

.00

(c) Other Political Committees

(such as PACs).....

.00

2750.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ▶

1702.53

85942.60

12. Transfers From Affiliated/Other

Party Committees.....

.00

.00

13. All Loans Received

.00

.00

14. Loan Repayments Received.....

.00

.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

695.55

695.55

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

.00

.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

.00

.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

.00

.00

(b) Levin Funds (from Schedule H5)

.00

.00

(c) Total Transfers (add 18(a) and 18(b))..

.00

.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

2398.08

86638.15

20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ▶

2398.08

86638.15

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| II. Disbursements | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures: | | |
| (a) Allocated Federal/Non-Federal Activity (from Schedule H4) | | |
| (i) Federal Share | 60.79 | 6767.39 |
| (ii) Non-Federal Share..... | 108.08 | 12030.80 |
| (b) Other Federal Operating Expenditures | 15651.59 | 22968.07 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | 15820.46 | 41766.26 |
| 22. Transfers to Affiliated/Other Party Committees..... | .00 | .00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | .00 | .00 |
| 24. Independent Expenditures (use Schedule E) | .00 | .00 |
| 25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)..... | .00 | .00 |
| 26. Loan Repayments Made..... | .00 | .00 |
| 27. Loans Made..... | .00 | .00 |
| 28. Refunds of Contributions To: | | |
| (a) Individuals/Persons Other Than Political Committees | .00 | .00 |
| (b) Political Party Committees | .00 | .00 |
| (c) Other Political Committees (such as PACs)..... | .00 | .00 |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... | .00 | .00 |
| 29. Other Disbursements | .00 | 1000.00 |
| 30. Federal Election Activity (2 U.S.C. §431(20)) | | |
| (a) Allocated Federal Election Activity (from Schedule H6) | | |
| (i) Federal Share | .00 | .00 |
| (ii) "Levin" Share..... | .00 | .00 |
| (b) Federal Election Activity Paid Entirely With Federal Funds | 4600.44 | 10826.30 |
| (c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b)).... | 4600.44 | 10826.30 |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) .. | 20420.90 | 53592.56 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 20312.82 | 41561.76 |

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| III. Net Contributions/Operating Expenditures | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans) (from Line 11(d), page 3) | 1702.53 | 85942.60 |
| 34. Total Contribution Refunds (from Line 28(d)) | .00 | .00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 1702.53 | 85942.60 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ► | 15712.38 | 29735.46 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3)..... | 695.55 | 695.55 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) ► | 15016.83 | 29039.91 |

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 6 OF 20
(check only one)

| | | | |
|---|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| <input type="checkbox"/> 17 | | | |

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NAME OF COMMITTEE (In Full)

Stark County Republican Party

Full Name (Last, First, Middle Initial)

A. Jordan D Greenwald

Mailing Address 1145 7th St NE

| | | |
|--------------|-------|----------|
| City | State | Zip Code |
| North Canton | OH | 44720 |

FEC ID number of contributing
federal political committee.

C

Name of Employer

GDK & Company

Occupation

Insurance Salesman

Receipt For: 2015

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

975.00

Date of Receipt

| | | | | |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 06 | / | 18 | / | 2015 |

Transaction ID : SA11Ai-CN11158

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

B. Mr. Timothy M Teynor

Mailing Address 6932 Salerno St NW

| | | |
|--------|-------|----------|
| City | State | Zip Code |
| Canton | OH | 44718 |

FEC ID number of contributing
federal political committee.

C

Name of Employer

Aultman Health Foundation

Occupation

Executive

Receipt For: 2015

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

| | | | | |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 06 | / | 01 | / | 2015 |

Transaction ID : SA11Ai-CN11157

Amount of Each Receipt this Period

1500.00

TrnsRef: Approval

Full Name (Last, First, Middle Initial)

C.

Mailing Address

| | | |
|------|-------|----------|
| City | State | Zip Code |
| | | |

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

| | | | | |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| | / | | / | |

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

1625.00

TOTAL This Period (last page this line number only)..... ►

1625.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 7 OF 20
(check only one)

| | | | | | | | | |
|------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|--|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input checked="" type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|--|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

Stark County Republican Party

Full Name (Last, First, Middle Initial)

A. VancoMailing Address 400 North Ridge Rd
Suite 1200

City Atlanta State GA Zip Code 30350

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2015

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 03 / 2015**Transaction ID : SA15-ER8**

Amount of Each Receipt this Period

400.00

Expenditure Refund

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

400.00

TOTAL This Period (last page this line number only)..... ►

400.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 8 OF 20

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Stark County Republican Party

Full Name (Last, First, Middle Initial)

A. Premier Bank & Trust

Mailing Address 600 S Main St

City North Canton State OH Zip Code 44720

Purpose of Disbursement
Bank Service Charge

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2015
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2015
Transaction ID : SB21b-EX7418

Amount of Each Disbursement this Period

165.01

Bank Service Charge

Full Name (Last, First, Middle Initial)

B. Kent State Conference Center

Mailing Address 6000 Frank Ave. N.w.

City North Canton State OH Zip Code 44720

Purpose of Disbursement
mckinley event

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2015
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 09 / 2015
Transaction ID : SB21b-EX7378

Amount of Each Disbursement this Period

5442.58

mckinley event

Full Name (Last, First, Middle Initial)

C. Avaya

Mailing Address 3795 Data Drive

City Norcross State GA Zip Code 30092

Purpose of Disbursement
telephone system expense

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2015
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2015
Transaction ID : SB21b-EX7413

Amount of Each Disbursement this Period

102.30

telephone system expense

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5709.89

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Stark County Republican Party

Full Name (Last, First, Middle Initial)

A. Protech Security

Mailing Address P.O. Box 35034

City Canton State OH Zip Code 44735

Purpose of Disbursement
office security

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2015
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2015
Transaction ID : SB21b-EX7415

Amount of Each Disbursement this Period

265.00

office security

Full Name (Last, First, Middle Initial)

B. Bruner-cox LlpMailing Address 4505 Stephen Circle NW
Suite 200

City Canton State OH Zip Code 44735

Purpose of Disbursement
audit

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2015
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 09 / 2015
Transaction ID : SB21b-EX7382

Amount of Each Disbursement this Period

2000.00

audit

Full Name (Last, First, Middle Initial)

C. Stark County Agricultural Society

Mailing Address PO Box 80279

City Canton State OH Zip Code 44708

Purpose of Disbursement
fair expense

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2015
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 09 / 2015
Transaction ID : SB21b-EX7383

Amount of Each Disbursement this Period

756.00

fair expense

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3021.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 10 OF 20

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Stark County Republican Party

Full Name (Last, First, Middle Initial)

A. Aep

Mailing Address PO Box 24401

City Canton State OH Zip Code 44701

Purpose of Disbursement
utility

Candidate Name

001

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2015
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 03 / 2015
Transaction ID : SB21b-EX7376

Amount of Each Disbursement this Period

126.32

utility

B. Aep

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 24401

City Canton State OH Zip Code 44701

Purpose of Disbursement
utility

Candidate Name

001

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2015
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2015
Transaction ID : SB21b-EX7412

Amount of Each Disbursement this Period

168.87

utility

C. Fitzpatrick Apts Ltd

Full Name (Last, First, Middle Initial)

Mailing Address 4942 Higbee Avenue NW
Suite A

City Canton State OH Zip Code 44718

Purpose of Disbursement
office rent

Candidate Name

001

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2015
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 02 / 2015
Transaction ID : SB21b-EX7369

Amount of Each Disbursement this Period

1247.82

office rent

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1543.01

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 11 OF 20

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Stark County Republican Party

Full Name (Last, First, Middle Initial)

A. Fitzpatrick Apts LtdMailing Address 4942 Higbee Avenue NW
Suite A

City Canton State OH Zip Code 44718

Purpose of Disbursement
rent

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For: 2015
☐ Primary ☒ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 30 / 2015**Transaction ID : SB21b-EX7416**

Amount of Each Disbursement this Period

1306.25

rent

Full Name (Last, First, Middle Initial)

B. Time Warner Cable

Mailing Address PO Box 0901

City Carol Stream State IL Zip Code 60132

Purpose of Disbursement
internet cable phone

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For: 2015
☐ Primary ☒ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 16 / 2015**Transaction ID : SB21b-EX7394**

Amount of Each Disbursement this Period

373.74

internet cable phone

Full Name (Last, First, Middle Initial)

C. Dominion East Ohio

Mailing Address PO Box 26785

City Richmond State VA Zip Code 23261

Purpose of Disbursement
utility

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For: 2015
☐ Primary ☒ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 03 / 2015**Transaction ID : SB21b-EX7377**

Amount of Each Disbursement this Period

41.03

utility

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1721.02

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Stark County Republican Party

Full Name (Last, First, Middle Initial)

A. Dominion East Ohio

Mailing Address PO Box 26785

City Richmond State VA Zip Code 23261

Purpose of Disbursement
utility

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For: 2015
☐ Primary ☒ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2015
Transaction ID : SB21b-EX7411

Amount of Each Disbursement this Period

32.85

utility

Full Name (Last, First, Middle Initial)

B. Gasser Jewelers

Mailing Address 205 Third St NW

City Canton State OH Zip Code 44702

Purpose of Disbursement
gift

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For: 2015
☐ Primary ☒ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 16 / 2015
Transaction ID : SB21b-EX7395

Amount of Each Disbursement this Period

213.00

gift

Full Name (Last, First, Middle Initial)

C. Great America

Mailing Address 8742 Innovation Way

City Chicago State IL Zip Code 60682

Purpose of Disbursement
copier

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For: 2015
☐ Primary ☒ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 23 / 2015
Transaction ID : SB21b-EX7397

Amount of Each Disbursement this Period

240.64

copier

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

486.49

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 13 OF 20

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Stark County Republican Party

Full Name (Last, First, Middle Initial)

A. Old Carolina Bbq

Mailing Address 4710 Everhard Rd NW

City Canton State OH Zip Code 44718

Purpose of Disbursement
catering picnic

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2015
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 16 / 2015
Transaction ID : SB21b-EX7393

Amount of Each Disbursement this Period

250.00

catering picnic

Full Name (Last, First, Middle Initial)

B. Kimble Recycling & Disposal

Mailing Address P.o.box 448

City Dover State OH Zip Code 44622

Purpose of Disbursement
refuse service

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2015
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 09 / 2015
Transaction ID : SB21b-EX7381

Amount of Each Disbursement this Period

57.25

refuse service

Full Name (Last, First, Middle Initial)

C. Key Bank

Mailing Address PO Box 89438

City Cleveland State OH Zip Code 44101

Purpose of Disbursement
misc credit card

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2015
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 23 / 2015
Transaction ID : SB21b-EX7428

Amount of Each Disbursement this Period

543.98

misc credit card

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

851.23

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 14 OF 20

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Stark County Republican Party

Full Name (Last, First, Middle Initial)

A. Office Depot

Date of Disbursement

| | | | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y | | |
| 0 | 6 | | | | 2 | 3 | | | | | | 2 | 0 | 1 | 5 |

Mailing Address 4433 Whipple Ave

| | | |
|--------|-------|----------|
| City | State | Zip Code |
| Canton | OH | 44718 |

Transaction ID : SB21b-EX7398Purpose of Disbursement
office supplies

001

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

57.82

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

| |
|--|
| Disbursement For: 2015 |
| <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼ |

[MEMO ITEM]
office supplies

State: District:

Full Name (Last, First, Middle Initial)

B. Table 6

Date of Disbursement

| | | | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y | | |
| 0 | 6 | | | | 2 | 3 | | | | | | 2 | 0 | 1 | 5 |

Mailing Address 6113 Whipple Ave

| | | |
|--------------|-------|----------|
| City | State | Zip Code |
| North Canton | OH | 44720 |

Transaction ID : SB21b-EX7399Purpose of Disbursement
meeting expense

001

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

36.62

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

| |
|--|
| Disbursement For: 2015 |
| <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼ |

[MEMO ITEM]
meeting expense

State: District:

Full Name (Last, First, Middle Initial)

C. Verizon Wireless

Date of Disbursement

| | | | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y | | |
| 0 | 6 | | | | 2 | 3 | | | | | | 2 | 0 | 1 | 5 |

Mailing Address 2465 Iron Point Rd Ste 100

| | | |
|--------|-------|----------|
| City | State | Zip Code |
| Folsom | CA | 95630 |

Transaction ID : SB21b-EX7400Purpose of Disbursement
wireless expense

001

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

208.19

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

| |
|--|
| Disbursement For: 2015 |
| <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼ |

[MEMO ITEM]
wireless expense

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 15 OF 20

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Stark County Republican Party

Full Name (Last, First, Middle Initial)

A. Constant ContactMailing Address 1601 Trapelo Rd
Suite 329

City Waltham State MA Zip Code 02451

Purpose of Disbursement
website expense

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For: 2015
☐ Primary ☒ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y
06 / 23 / 2015**Transaction ID : SB21b-EX7401**

Amount of Each Disbursement this Period

55.00

[MEMO ITEM]
website expense

Full Name (Last, First, Middle Initial)

B. Best Buy #286

Mailing Address 4831 Whipple Avenue NW

City Canton State OH Zip Code 44718

Purpose of Disbursement
office supplies

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For: 2015
☐ Primary ☒ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y
06 / 23 / 2015**Transaction ID : SB21b-EX7402**

Amount of Each Disbursement this Period

79.86

[MEMO ITEM]
office supplies

Full Name (Last, First, Middle Initial)

C. Office Max #381

Mailing Address 4333 Lincoln Way East

City Massillon State OH Zip Code 44646

Purpose of Disbursement
office supplies

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For: 2015
☐ Primary ☒ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y
06 / 23 / 2015**Transaction ID : SB21b-EX7403**

Amount of Each Disbursement this Period

106.49

[MEMO ITEM]
office supplies**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 16 OF 20

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Stark County Republican Party

Full Name (Last, First, Middle Initial)

A. Hicks Telecom

Mailing Address 14425 German Church Rd

City Atwater State OH Zip Code 44201

Purpose of Disbursement
telephone system

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For: 2015
☐ Primary ☒ General
☐ Other (specify) ▼

001

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 23 2015
Transaction ID : SB21b-EX7396

Amount of Each Disbursement this Period

1249.97

telephone system

B. B- Lee Electric Co.

Full Name (Last, First, Middle Initial)

Mailing Address 1410 Second St SW

City Canton State OH Zip Code 44702

Purpose of Disbursement
wiring office

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For: 2015
☐ Primary ☒ General
☐ Other (specify) ▼

001

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 30 2015
Transaction ID : SB21b-EX7414

Amount of Each Disbursement this Period

1120.00

wiring office

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼
Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2369.97

15702.61

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 17 OF 20

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Stark County Republican Party

Full Name (Last, First, Middle Initial)

A. Treasurer State of Ohio

Mailing Address PO Box 182215

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Columbus | OH | 44702 |

Purpose of Disbursement
school tax

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

State: District:

| |
|--|
| Disbursement For: 2015 |
| <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼ |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06 | | 30 | | 2015 |

Transaction ID : SB30b-EX7409

Amount of Each Disbursement this Period

| |
|------|
| 2.70 |
|------|

school tax

Full Name (Last, First, Middle Initial)

B. Treasurer State of Ohio

Mailing Address PO Box 182215

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Columbus | OH | 44702 |

Purpose of Disbursement
state tax

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

State: District:

| |
|--|
| Disbursement For: 2015 |
| <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼ |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06 | | 30 | | 2015 |

Transaction ID : SB30b-EX7410

Amount of Each Disbursement this Period

| |
|--------|
| 112.08 |
|--------|

state tax

Full Name (Last, First, Middle Initial)

C. Shirley R. Jones

Mailing Address 2545 Hankins Rd. N.w.

| | | |
|-----------|-------|----------|
| City | State | Zip Code |
| Massillon | OH | 44646 |

Purpose of Disbursement
salary

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

State: District:

| |
|--|
| Disbursement For: 2015 |
| <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼ |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06 | | 30 | | 2015 |

Transaction ID : SB30b-EX7406

Amount of Each Disbursement this Period

| |
|--------|
| 183.36 |
|--------|

salary

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

| |
|--------|
| 298.14 |
|--------|

| |
|--|
| |
|--|

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 18 OF 20

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Stark County Republican Party

Full Name (Last, First, Middle Initial)

A. Cindy Meisner

Mailing Address 6657 Towpath

| | | |
|--------------|-------|----------|
| City | State | Zip Code |
| Canal Fulton | OH | 44614 |

Purpose of Disbursement

Candidate Name

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

| |
|--|
| Disbursement For: 2015 |
| <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

001

Category/
Type

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06 | | 30 | | 2015 |

Transaction ID : SB30b-EX7407

Amount of Each Disbursement this Period

| |
|--------|
| 306.27 |
|--------|

Administrative/Salary/Overhead Expenses

Full Name (Last, First, Middle Initial)

B. Jason Wise

Mailing Address 1151 Rolena Cir

| | | |
|--------|-------|----------|
| City | State | Zip Code |
| Canton | OH | 44708 |

Purpose of Disbursement
payroll

Candidate Name

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

| |
|--|
| Disbursement For: 2015 |
| <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

001

Category/
Type

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06 | | 09 | | 2015 |

Transaction ID : SB30b-EX7390

Amount of Each Disbursement this Period

| |
|--------|
| 709.46 |
|--------|

payroll

Full Name (Last, First, Middle Initial)

C. Jason Wise

Mailing Address 1151 Rolena Cir

| | | |
|--------|-------|----------|
| City | State | Zip Code |
| Canton | OH | 44708 |

Purpose of Disbursement
salary

Candidate Name

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

| |
|--|
| Disbursement For: 2015 |
| <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

001

Category/
Type

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06 | | 30 | | 2015 |

Transaction ID : SB30b-EX7405

Amount of Each Disbursement this Period

| |
|---------|
| 2163.80 |
|---------|

salary

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3179.53

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 19 OF 20

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Stark County Republican Party

Full Name (Last, First, Middle Initial)

A. Eftps

Mailing Address P.o.box 173788

| | | |
|--------|-------|----------|
| City | State | Zip Code |
| Denver | CO | 80217 |

Purpose of Disbursement
payroll tax

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |
| State: | District: |

| |
|--|
| Disbursement For: 2015 |
| <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼ |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06 | | 30 | | 2015 |

Transaction ID : SB30b-EX7408

Amount of Each Disbursement this Period

| |
|---------|
| 1122.77 |
|---------|

payroll tax

B.

Full Name (Last, First, Middle Initial)

Mailing Address

| | | |
|------|-------|----------|
| City | State | Zip Code |
|------|-------|----------|

Purpose of Disbursement

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |
| State: | District: |

| |
|---|
| Disbursement For: |
| <input type="checkbox"/> Primary <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼ |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
|-------|---|-------|---|-------------|

Amount of Each Disbursement this Period

| |
|--|
| |
|--|

C.

Full Name (Last, First, Middle Initial)

Mailing Address

| | | |
|------|-------|----------|
| City | State | Zip Code |
|------|-------|----------|

Purpose of Disbursement

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |
| State: | District: |

| |
|---|
| Disbursement For: |
| <input type="checkbox"/> Primary <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼ |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
|-------|---|-------|---|-------------|

Amount of Each Disbursement this Period

| |
|--|
| |
|--|

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

| |
|---------|
| 1122.77 |
|---------|

| |
|---------|
| 4600.44 |
|---------|

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 20 OF 20

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Stark County Republican Party

| | | | | | |
|---|-------------|---------------------------------------|------------------|--|----------------|
| A. Full Name (Last, First, Middle Initial) Aep | | Transaction ID : SH421a-EX7412 | | Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | |
| Mailing Address PO Box 24401 | | | | | |
| City Canton | State OH | Zip Code 44701 | | | |
| Purpose of Disbursement: utility | | 001 Category/ Type | | Allocated Activity or Event Year-To-Date 18798.19 | |
| Activity or Event Identifier: utility | | | | Date MM / DD / YYYY 06 / 30 / 2015 | |
| FEDERAL SHARE | | + | NONFEDERAL SHARE | | = TOTAL AMOUNT |
| 60.79 | | | 108.08 | | 168.87 |

| | | | | | |
|---|-------|----------|------------------|---|----------------|
| B. Full Name (Last, First, Middle Initial) | | | | Allocated Activity or Event: <input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | |
| Mailing Address | | | | | |
| City | State | Zip Code | | | |
| Purpose of Disbursement: | | | | Allocated Activity or Event Year-To-Date | |
| Activity or Event Identifier: | | | | Date MM / DD / YYYY | |
| FEDERAL SHARE | | + | NONFEDERAL SHARE | | = TOTAL AMOUNT |
| | | | | | |

| | | | | | |
|---|-------|----------|------------------|---|----------------|
| C. Full Name (Last, First, Middle Initial) | | | | Allocated Activity or Event: <input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | |
| Mailing Address | | | | | |
| City | State | Zip Code | | | |
| Purpose of Disbursement: | | | | Allocated Activity or Event Year-To-Date | |
| Activity or Event Identifier: | | | | Date MM / DD / YYYY | |
| FEDERAL SHARE | | + | NONFEDERAL SHARE | | = TOTAL AMOUNT |
| | | | | | |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 60.79 | | 108.08 | | 168.87 |

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

| | | | | |
|---------------|--|------------------|--|--------------|
| FEDERAL SHARE | | NONFEDERAL SHARE | | TOTAL AMOUNT |
| 60.79 | | 108.08 | | 168.87 |